



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY**

05/21/91

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->	NJD986607752
FACILITY NAME ->	EXXON CO USA #32558
MAILING ADDRESS ->	PO BOX 4415 HOUSTON, TX 77210
INSTALLATION ADDRESS ->	936 RTE 202 S SOMERVILLE, NJ 08876

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: POOL ALDA_S STAFF ASSIST
EXXON CO USA #32558
PO BOX 4415
HOUSTON, TX 77210

Cold

United States Environmental Protection Agency

Activity

91-03-12

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

NJD 986607752

II. Name of Installation (Include company and specific site name)

EXXON CO USA #32558

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

936 RT 202 South

Street (continued)

City or Town

SOMERVILLE

State

ZIP Code

NJ 8876

County Code

County Name

SOMERSET

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

PO BOX 4415

City or Town

HOUSTON

State

ZIP Code

TX 77210-4415

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

POOL

(first)

ALDA S

Job Title

STAFF ASSISTANT

Phone Number (area code and number)

713-656-7709

VI. Installation Contact Address (See instructions)

A. Contact Address

Location

Mailing



B. Street or P.O. Box

City or Town

State

ZIP Code

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

EXXON CO USA

Street, P.O. Box, or Route Number

PO BOX 4415

City or Town

HOUSTON

State

ZIP Code

TX 77210-4415

Phone Number (area code and number)

713-656-7761

B. Land Type

P

C. Owner Type

P

D. Change of Owner

Indicator

Yes

No

X

(Date Changed)

Month

Day

Year

MAR 07 1991

